## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 1 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) VOTE 2 REDUCE DEBT (V2RD)	FEC IDENTIFICATION NUMBER ▼
VOTE 2 REDUCE DEDT (V2RD)	C C00563064
	. M - M / D - D / Y - Y - Y
Check if 24-hour report 48-hour report New report Amends report filed	d on
Full Name of Payee  Marcie Finney	Date of Public Distribution/Dissemination
	09 / 13 / 2014
Mailing Address 2508 College Ave	Amount
City State Zip Code	571.43
Fort Worth TX 76110	Transaction ID : SE.4702 Date of Disbursement or Obligation
Purpose of Expenditure Services for Printing and Design of Door Hanger  Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	ce Sought: House District:
TERRI LYNN LAND Oppose	President State: MI Senate
Calendar Year-To-Date Per Election for Office Sought  Disb 2014	oursement For: Primary X General  Other (specify)   Other
Full Name of Payee Office Depot	Date of Public Distribution/Dissemination
Malling Address	09 18 2014
Mailing Address 6600 N Military Trail	Amount
City State Zip Code	12.97
Boca Raton FL 33496	Transaction ID : SE.5039  Date of Disbursement or Obligation
Purpose of Expenditure Supplies for Phone Centers  Category/ Type	09 / 11 / 2014
	ce Sought: House District:
TERRI LYNN LAND Oppose	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought  Disb 201-	oursement For: Primary General  Other (specify)   Other
(a) CURTOTAL of Hearingd Independent Funerality was	501.40
(a) SUBTOTAL of Itemized Independent Expenditures	584.40
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	·
	09 20 / 2014
Signature	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	THORIES	PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
VOTE 2 REDUCE DEBT (V2RD)		C C00563064
Check if 24-hour report X 48-hour report New re	port Amends report	filed on M = M / D = D / Y = Y = Y
Full Name of Payee		Date of Public Distribution/Dissemination
Pressman Printing Inc		09 / 13 / 2014
Mailing Address 8308 Clifford St		Amount
City State	Zip Code	6503.38
Fort Worth TX	76108	Transaction ID : SE.4703  Date of Disbursement or Obligation
Purpose of Expenditure Printing and Shipping for Door Hangers	Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	X Support	Office Sought: House District:
TERRI LYNN LAND	Oppose	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary ☐ General  Other (specify) ►
Full Name of Payee		Date of Public Distribution/Dissemination
Staples		09 18 2014
Mailing Address 500 Staples Dr		Amount
City State	Zip Code	545.07
Farmingham MA	01702	Transaction ID : SE.5040 Date of Disbursement or Obligation
Purpose of Expenditure Supplies for Phone Centers	Category/ Type	09 / D 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District:
TERRI LYNN LAND	Oppose	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For:  Primary  General 2014  Other (specify) ▶
(a) SUPTOTAL of Itamized Independent Evenerditures		7040.45
(a) SUBTOTAL of Itemized Independent Expenditures		7048.45
(b) SUBTOTAL of Unitemized Independent Expenditures		<b>&gt;</b>
(c) TOTAL Independent Expenditures		·
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Mr. KENNETH W. DAVIS JR.  [Electro] Signature	nically Filed] Date	09 20 / 2014

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
VOTE 2 REDUCE DEBT (V2RD)	C C00563064
	C COCCCC-
Check if 24-hour report 48-hour report New report Amends report filed	d on M M M / D D / Y Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Strategic Media 21	09 18 2014
Mailing Address 560 S. Winchester Blvd	Amount
Ste 500	
City State Zip Code	2857.00
San Jose CA 95128	Transaction ID : SE.5041  Date of Disbursement or Obligation
Purpose of Expenditure Advertising Services and Production  Category/ Type	09 19 / 2014
Name of Federal Candidate Support Office	e Sought: House District:
TERRI LYNN LAND  Oppose	President Senate State: MI
	ursement For: Primary X General
Per Election for Office Sought 98493.36 2014	
Full Name of Payee Strategic Media 21	Date of Public Distribution/Dissemination
	09 18 2014
Mailing Address 560 S. Winchester Blvd	Amount
Ste 500	Amount
City State Zip Code	12500.00
San Jose CA 95128	Transaction ID : SE.5042  Date of Disbursement or Obligation
Purpose of Expenditure Advertising Services and Production  Category/ Type	09 / 22 / 2014
Name of Federal Candidate Support Office	e Sought: House District:
TERRI LYNN LAND Oppose	President State: MI
	ursement For: Primary X General
Per Election for Office Sought 110993.36 2014	4 Other (specify) ▶
-	
(a) SUBTOTAL of Itemized Independent Expenditures	15357.00
(b) SUBTOTAL of Unitemized Independent Expenditures	1 1 7 1 1 7 1 1 7 1
(c) TOTAL Independent Expenditures	22989.85
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Mr. KENNETH W. DAVIS JR.  [Electronically Filed] Date	09 20 2014
Signature	